YEAR **1992**

California Exempt Organization Business Income Tax Return

COPY

FORM **109**

For taxable or income year beginning MONTH 1 DAY 1 YEAR 1992, and ending MONTH 12 DAY 31 YEAR 92.

Attach Preaddressed Label

Is this organization claiming any enterprise zone, program area or Los Angeles Revitalization Zone tax benefits? • ☐ Yes ☒ No

California corporation or organization number: D-0546604

Federal employer identification number: 94-2147154

Name and address of the trustee:

Corporation/organization name: FOINT FOUNDATION

Nature of trade or business: ADVERT & SALES of MAILING LIST

Address: 27 GATE FIVE ROAD

Social security or federal employer identification number:

City: SAUSALITO, State: CA. ZIP Code: 94965

Form number(s) or federal form(s) filed: 990 T

If unrelated trade or business gross income is $10,000 or less, complete only Side 1. List the sources of income on line 1 or line 10, include deductions, and sign the return. Complete all applicable parts of the form if unrelated trade or business gross income is over $10,000.

Organizations Taxable as Corporations

Attach Check or Money Order

1	Unrelated business taxable income from Side 2, Part II, line 30	1	957
2	Multiply line 1 by average apportionment percentage _____% from Schedule K, line 5 •	2	
3	Enterprise zone, program area or Los Angeles Revitalization Zone losses. See instructions •	3	
4	Disaster loss carryover deduction from form FTB 3805Q •	4	
5	Add line 3 and line 4	5	
6	Net unrelated business taxable income. Subtract line 5 from the lesser of line 1 or line 2 •	6	957
7	Tax. 9.3 % x line 6. See General Instruction J	7	89
8	Tax credits from Schedule B, line 8, or Schedule P (100). See Schedule B instructions •	8	
9	Balance. Subtract line 8 from line 7. If line 8 is greater than line 7, enter -0-	9	89

Organizations Taxable as Trusts

Tax Computation

10	Unrelated business taxable income from Side 2, Part II, line 30 •	10	
11	Enterprise zone, program area or Los Angeles Revitalization Zone losses. See instructions •	11	
12	Disaster loss carryover deduction from form FTB 3805V •	12	
13	Add line 11 and line 12	13	
14	Net unrelated business taxable income. Subtract line 13 from line 10 •	14	
15	Tax on amount on line 14. See General Instruction J	15	
16	Tax credits from Schedule B, line 8, or Schedule P (541). See Schedule B instructions •	16	
17	Balance. Subtract line 16 from line 15. If line 16 is greater than line 15, enter -0-	17	

Total Tax

18	Tax from line 9 or line 17 ■	18	
19	Alternative minimum tax. See General Instruction N ■	19	
20	Total tax. Add line 18 and line 19 ■	20	89

Payments

21	Overpayment(s) from a prior year allowed as a credit	21	16
22	1992 estimated tax payments	22	
23	Amount paid with extension of time to file return	23	300
24	Total payments and credits. Add lines 21 through 23	24	316

Tax Due or Overpayment

25	**Tax due.** Subtract line 24 from line 20. Pay entire amount with return. See instructions ■	25	89
26	**Overpayment.** Subtract line 20 from line 24. See instructions ■	26	227
27	Enter amount of line 26 to be applied to 1993 estimated tax ■	27	127
28	Enter amount of line 26 to be refunded. Subtract line 27 from line 26 ■	28	100
29	Penalties and interest. See General Instruction L	29	
	☐ Check box if estimate penalty was computed using Exception C or D and attach form FTB 5806.		
30	**Total amount due.** Add line 25 and line 19. Pay this amount with this return	30	

Person to contact for additional information: Telephone ( )

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

COPY

▶ Signature of officer: 11/11/93 Date ▶ Title: EXECUTIVE DIRECT Daytime telephone: (415) 332-1716

Paid Preparer's Use Only

Preparer's signature ▶ Date 11/9/93 Check if self-employed ☐ Preparer's social security no. 534-36-7935

Firm's name (or yours, if self-employed) and address ▶ G2 WHEELER, 295 BONIFACIO PARK BLVD. KENSINGTON, 94707 FEIN

Daytime telephone (510) 527-6788

Unrelated Business Taxable Income

Part I Unrelated Trade or Business Income

1 a Gross receipts or gross sales _____ b Less returns and allowances _____ Balance ▶	1c	26075
2 Cost of goods sold and/or operations from Schedule A, line 7	2	6007
3 Gross profit. Subtract line 2 from line 1c	3	20068
4 a Capital gain net income. See Specific Line Instructions – Trusts attach Schedule D (541)	4a	
b Net gain (loss) from Part II, federal Form 4797 (attached) – Trusts attach Schedule D-1	4b	
c Capital loss deduction for trusts	4c	
5 Income (or loss) from partnerships. Attach Schedule K-1 (565) or similar schedule	5	
6 Rental income from Schedule C	6	
7 Unrelated debt-financed income from Schedule D	7	
8 Investment income of an R&TC Section 23701g, 23701i, 23701n or 23701q organization from Schedule E	8	
9 Annuities, interest, rents and royalties of controlled organizations from Schedule F	9	
10 Exploited exempt activity income from Schedule G	10	
11 Advertising income from Schedule H, Part III, Column A	11	
12 Other income. Attach schedule	12	
13 Total unrelated trade or business income. Add lines 3 through 12	13	20,068

Part II Deductions Not Taken Elsewhere (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors and trustees from Schedule I	14	2442
15 Salaries and wages	15	4804
16 Repairs	16	
17 Bad debts	17	
18 Interest. Attach schedule	18	
19 Taxes. Attach schedule PAYROLL	19	614
20 Contributions. See instructions and attach schedule	20	
21 a Depreciation (Corporations and Associations – Schedule J) (Trusts – form FTB 3885F) 21a		
b Less: depreciation claimed on Schedule A 21b	21	
22 Depletion. Attach schedule	22	
23 a Contributions to deferred compensation plans	23a	
b Employee benefit programs. See instructions	23b	
24 Other deductions. Attach schedule STATEMENT #1	24	10257
25 Total deductions. Add lines 14 through 24	25	18117
26 Unrelated business taxable income before allowable excess advertising costs. Subtract line 25 from line 13	26	1951
27 Excess advertising costs from Schedule H, Part III, Column B	27	
28 Unrelated business taxable income before specific deduction. Subtract line 27 from line 26	28	
29 Specific deduction. See instructions	29	1000
30 Unrelated business taxable income. Subtract line 29 from line 28. If line 29 is greater than line 28, enter the lesser of line 28 or -0-	30	951

Caution: No business expense deduction will be allowed to a taxpayer for expenses incurred at or payments made to a club which restricts membership or the use of its services or facilities on the basis of age, sex, race, religion, color, ancestry or national origin.

Schedule A Cost of Goods Sold and/or Operations Method of Inventory Valuation (specify) _____

1 Inventory at beginning of year	1	0
2 Purchases	2	6007
3 Cost of labor	3	
4 a Additional IRC Section 263A costs. Attach schedule	4a	
b Other costs. Attach schedule	4b	
5 Total. Add lines 1 through 4b	5	
6 Inventory at end of year	6	0
7 Cost of goods sold and/or operations. Subtract line 6 from line 5. Enter here and on Part I, line 2	7	6007

Do the rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to this organization? ☐ Yes ☐ No

Schedule B Tax Credits Do not complete if you must file Schedule P (100 or 541).

1 Jobs credit from form FTB 3524	1	
2 Energy conservation credit carryover from form FTB 3540	2	
3 Research credit from form FTB 3523 or form FTB 3505	3	
4 Orphan drug credit from form FTB 3528	4	
5 Commercial solar energy and solar energy credit carryovers from form FTB 3540	5	
6 Low-income housing credit from form FTB 3521 and form FTB 3521A	6	
7 Other credits (specify) _____	7	
8 Total. Add lines 1 through 7. Enter here and on Side 1, line 8, for corporations, or line 16 for trusts	8	

Schedule H Advertising Income and Excess Advertising Costs

Part I Income from Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising income or excess advertising costs. If col. 2 is greater than col. 3, complete cols. 5, 6 and 7. If col. 3 is greater than col. 2, enter the excess in Part III, Col. B(b). Do not complete cols. 5, 6 and 7.	5 Circulation income	6 Readership costs	7 If col. 5 is greater than col. 6, enter the income shown in col. 4, in Part III, Col. A(b). If col. 6 is greater than col. 5, subtract col. 6 and col. 3 from col. 5 and col. 2. Enter amount in Part III, Col. A(b).
N/A						
Totals						

Part II Income from Periodicals Reported on a Separate Basis

		N/A				

Part III Column A — Net Advertising Income

(a) Enter "consolidated periodical" and/or names of non-consolidated periodicals	(b) Enter total amount from Part I, column 4 or 7, and amounts listed in Part II, cols. 4 and 7
	N/A
Enter total here and on Side 2, Part I, line 11	

Part III Column B — Excess Advertising Costs

(a) Enter "consolidated periodical" and/or names of non-consolidated periodicals	(b) Enter total amount from Part I, column 4, and amounts listed in Part II, column 4
Enter total here and on Side 2, Part II, line 27	

Schedule I Compensation of Officers, Directors, and Trustees

1 Name of Officer	2 Social Security Number	3 Title	4 Percent of time devoted to business	5 Compensation attributable to unrelated business	6 Expense account allowances
STEWARD BRAND		DIRECTOR	NONE		
KELLY TEEVAN		EXEC. DIR	%	960	
JON McINTYRE		DIRECTOR	%	1482	
CHRISTINA DESSER		DIRECTOR	%	NONE	
			%		
Total. Enter here and on Side 2, Part II, line 14				2442	

Schedule J Depreciation (Corporations and Associations only. Trusts use form FTB 3885F.)

1 Group and guideline class or description of property	2 Date acquired	3 Cost or other basis	4 Depreciation allowed or allowable in prior years	5 Method of computing depreciation	6 Life or rate	7 Depreciation for this year
1 Total additional first-year depreciation (do not include in items below)						
2 Other depreciation:						
Buildings						
Furniture and fixtures						
Transportation equipment						
Machinery and other equipment						
Other (specify)						
3 Other depreciation						
4 Total						
5 Amount of depreciation claimed elsewhere on return						
6 Balance. Subtract line 5 from line 4. Enter here and on Side 2, Part II, line 21a						

Schedule K Apportionment Formula

Limited to unrelated trade or business amounts	(a) Total within and outside California	(b) Total within California	(c) Percent within California ((b) ÷ (a))
1 Average yearly value of real and tangible personal property whether owned or rented. See instructions	N/A		
2 Wages, salaries, and other compensation of employees			
3 Gross sales and/or receipts less returns and allowances			
4 Total percent. Enter the total of lines 1, 2 and 3, column (c)			
5 Average apportionment percentage. Line 4 × 1/3 (.3333). Enter here and on Side 1, line 2			

Schedule L Add-On Taxes or Recapture of Tax. See instructions.

1 Interest computation under the look-back method for completed long-term contracts. Attach form FTB 3834	
2 Interest on tax attributable to installment: (a) Sales of certain timeshares of residential lots	
(b) Method for non-dealer installment obligations	
3 Credit recapture. Credit name _____	
4 Total. Combine the amounts on lines 1 through 3. See instructions	

Schedule C Rental Income from Real Property and Personal Property Leased with Real Property

Note: For rental income from debt-financed property, use Schedule D, R&TC Section 23701g and Section 23701i organizations. See instructions for exceptions.

1 Description of property	2 Rent received or accrued	3 Percentage of rent attributable to personal property
N/A		%
		%
		%

4 Complete if any item in column 3 is more than 50%, or for any item if the rent is determined on the basis of profit or income		5 Complete if any item in column 3 is more than 10% but not more than 50%		
(a) Deductions directly connected (attach schedule)	(b) Income includible (column 2 less column 4(a))	(a) Gross income reportable (column 2 × column 3)	(b) Deductions directly connected with personal property (attach schedule)	(c) Net income includible (column 5(a) less column 5(b))
Add columns 4(b) and 5(c). Enter here and on Side 2, Part I, line 6				

Schedule D Unrelated Debt-Financed Income

1 Description of debt-financed property	2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
N/A			

4 Amount of average acquisition indebtedness on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Debt basis percentage (column 4 ÷ column 5)	7 Gross income reportable (column 2 × column 6)	8 Allocable deductions (total of columns 3(a) and 3(b) × column 6)	9 Net income (or loss) includible (column 7 less column 8)
		%			
		%			
		%			
Total. Enter here and on Side 2, Part I, line 7					

Schedule E Investment Income of a Section 23701g, 23701l, 23701n or 23701q Organization

1 Description	2 Amount	3 Deductions directly connected (attach schedule)	4 Net investment income (column 2 less column 3)	5 Set-asides (attach schedule)	6 Balance of investment income (column 4 less column 5)
			N/A		
Total. Enter here and on Side 2, Part I, line 8					
Enter gross income from members (dues, fees, charges or similar amounts)					

Schedule F Income (Annuities, Interest, Rents and Royalties) From Controlled Organizations

1 Name and address of controlled organizations	2 Gross income from controlled organizations	3 Deductions directly connected with column 2 income (attach schedule)	4 Exempt controlled organizations		
			(a) Unrelated business taxable income	(b) Taxable income computed as though not exempt under Sec. 23701, or the amount in col. (a), whichever is greater	(c) Percentage (column (a) ÷ column (b))
					%
					%
					%

5 Nonexempt controlled organizations			6 Gross income reportable (column 2 × column 4(c) or column 5(c))	7 Allowable deductions (column 3 × column 4(c) or column 5(c))	8 Net income includible (column 6 less column 7)
(a) Excess taxable income	(b) Taxable income or amount in column (a), whichever is greater	(c) Percentage (col. (a) ÷ col. (b))			
		N/A %			
		%			
		%			
Total. Enter here and on Side 2, Part I, line 9					

Schedule G Exploited Exempt Activity Income, other than Advertising Income

1 Description of exploited activity (attach schedule if more than one unrelated activity is exploiting the same exempt activity)	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income from unrelated trade or business (col. 2 less col. 3)	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expense (col. 6 less col. 5 but not more than col. 4)	8 Net income includible (col. 4 less col. 7 but not less than zero)
			N/A				
Total. Enter here and on Side 2, Part I, line 10							

FROM 199 PART II LINE #24 1992

POINT FOUNDATION 94-214-7154

EMPLOYEE BENEFITS	333.	
OUTSIDE PRO. SERVICES	563.	
SUPPLIES	343.	
DISTRIBUTION AND PROMO	182.	
MAILING LIST FULFILLMENT	185.	
MISC	245.	
PRINTING	1,881.	
DEPRECIATION	174.	
TLEPHONE	115.	
WRITERS/CONTRIBUTORS	1,214.	
SUBS FULFILLMENT	619.	
SUBS PROMO	1,309.	
MAILING LIST EXPENSE (DIRECT)	1,971.	
EQUIPMENT RENTAL	155.	
RENT	968.	
	10,257.	

cS

CALIFORNIA DEPRECIATION AND AMORTIZATION WORKSHEET 1992

POINT FOUNDATION 942-14-7154

[H] For MACRS, 'H' = Half-year convention, 'M' = Mid-quarter convention

	Description of property	Date acqrd	Cost Basis	Sect 179 Dedn/Land	Previous Deprec	Deprec Basis	Deduct this yr
1	CAMERA BODY	Apr80	525.		525.	525.	
2	CAMERA LENS	Apr80	515.		515.	515.	
3	OFFICE EQUIPMENT	Nov82	911.		911.	911.	
4	CANNON COPIER	Jun83	12,587.		12,587.	12,587.	
5	PHONE STYSTEM	Jun83	6,100.		6,100.	6,100.	
6	PHONE SYSTEM	Jul83	20,364.		20,364.	20,364.	
7	PHONE SYSTEM	Aug83	2,262.		2,262.	2,262.	
8	MODEM (3)	Sep83	2,097.		2,097.	2,097.	
9	PHONE SYSTEM	Oct83	803.		803.	803.	
10	PHONE SYSTEM	Nov83	1,381.		1,381.	1,381.	
11	LESSON SECURITY	Nov83	1,595.		1,595.	1,595.	
12	LANGE VIDEO SLIE	Dec83	2,612.		2,612.	2,612.	
13	OKIDA PRINTER	Dec84	360.		360.	360.	
14	OKIDATA PRINTER	Jun84	460.		460.	460.	
15	COMPAQ PLUS (2)	Nov84	8,056.		8,056.	8,056.	
16	HP THNKJET PRINT	Nov85	314.		314.	314.	
17	MITA COPIES	Jan88	3,222.		2,577.	3,222.	644.
18	MAC II W/MONITOR	Feb88	2,799.		2,193.	2,799.	560.
19	SOFT-IN-HSE FULL	Feb88	14,101.		14,101.	14,101.	
20	9 TRCK TAPE DRIV	Mar88	3,194.		2,449.	3,194.	639.
21	MEMORY EXPAN BRD	Mar88	451.		345.	451.	90.
22	MAC-SE HRD DSK 2	Mar88	2,029.		1,556.	2,029.	406.
23	MAC-SE HRD DSK 2	Mar88	2,030.		1,556.	2,030.	406.
24	CMS HARD DISK	Mar88	596.		456.	596.	119.
25	PRIAM EXT DSK VE	Apr88	2,130.		1,597.	2,130.	426.
26	ELPK-TEK PWR SUP	Apr88	539.		405.	539.	108.
27	C.ITOH PRINTER	May88	1,704.		1,250.	1,704.	341.
28	VCR	Nov89	282.		168.	251.	50.
29	LASERWRITER II	Feb90	2,693.		1,078.	2,693.	539.
30	DONATD COMPS&PRT	May90	10,600.		4,240.	10,600.	2,120.
31	MACSUB HRD DSK	Jan91	2,153.		431.	2,153.	431.
32	MACSUB TAPE BACK	Jan91	817.		163.	817.	163.
33	FAX MACHINE	Jan92	400.			400.	57.
34	MACSUB COMPUTER	Mar92	1,538.			1,538.	308.
35	WORKING SCANNER	Apr92	1,158.			1,158.	232.
36	WORKING HRD DSK	Apr92	446.			446.	89.
37	PROD SOFTWARE	Jul92	2,000.			2,000.	400.
38	PLI-INF88	Dec92	652.			652.	130.
39	MACSUB EXPN	Dec92	1,000.			1,000.	200.
40	TYPESETTER TERMN	May86	4,599.		4,599.	4,599.	
	Totals for Current Year...		122,075.		100,106.		8,458.

$174 (2.03%) Allocated medical

******* FOR YOUR RECORDS ONLY--DO NOT FILE WITH THE FTB *******

Form **2758**
(Rev. August 1992)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns

▶ File a separate application for each return.

OMB No. 1545-0148
Expires 5-31-95

Please type or print. File the **original and one copy** by the due date for filing your return. (See instructions on back.)

Name: POINT FOUNDATION

Employer identification number: 94 : 2147154

Number and street, (or P.O. box no. if mail is not delivered to street address.): 27 GATE FIVE ROAD

Apt. or suite no.:

City, town or post office, state, and ZIP code. (For a foreign address, see instructions.): SAUSALITO, CALIFORNIA 94966

Note: *Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use* **Form 7004** *to request an extension of time to file.*

Partnerships, REMICs, and trusts (except those filing Form 990-T) must use **Form 8736** *to request an extension of time to file.*

1 An extension of time until NOVEMBER 15, 19 93, is requested to file (check only one):

☐ Form 706GS(D)	☐ Form 990-PF	☐ Form 1041-A	☐ Form 3520-A	☐ Form 8612
☐ Form 706GS(T)	☐ Form 990-T (401(a) or 408(a) trust)	☐ Form 1042	☐ Form 4720	☐ Form 8613
☒ Form 990 or 990EZ	☐ Form 990-T (trust other than above)	☐ Form 1042S	☐ Form 5227	☐ Form 8725
☐ Form 990-BL	☐ Form 1041 (estate) (see instructions)	☐ Form 1120-ND (4951 taxes)	☐ Form 6069	☐ Form 8804

If the organization does not have an office or place of business in the United States, check this box. . . . . ▶ ☐

2a For calendar year 19 92, or other tax year beginning ..... and ending .....

b If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3 Has an extension of time to file been previously granted for this tax year? . . . . . ☐ Yes ☐ No

4 State in detail why you need the extension. NOT ALL INFORMATION IS AVAILABLE TO COMPLETE RETURN ACCURATELY BY MAY 15.

RECEIVED MAY 20 '93

5a If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, or 8804, enter the tentative tax, less any nonrefundable credits. (See instructions.) $ NONE

b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit . . . . . $

c **Balance due** (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD coupon if required. (See instructions.) . . . . . $ NONE

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature ▶ Christine Goodson Title ▶ Accounting Mngr Date ▶ 5/13/93

FILE ORIGINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by the IRS

☒ We **HAVE** approved your application. Please attach this form to your return.

☐ We **HAVE NOT** approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return.

☐ We **HAVE NOT** approved your application. After considering the reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.

☐ We cannot consider your application because it was filed after the due date of the return for which an extension was requested.

☐ Other: 8 9 5 5 2 2 4 8 2 2

Director By: Date

EXTENSION TO FILE

If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent.

Please Type or Print

Name

Number and street, (or P.O. box no. if mail is not delivered to street address.) NOV 15 1993 Apt. or suite no.

City, town or post office, state, and ZIP code. (For a foreign address, see instructions.) Theron C. Polivka, Director Fresno Service Center

For Paperwork Reduction Act Notice, see back of form.

Cat. No. 11976B Form **2758** (Rev. 8-92)